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Bib Data Sheet

CONFIRMATION NO. 8390

<b>SERIAL NUMBER</b> 10/821,250	<b>FILING OR 371(c) DATE</b> 04/08/2004 <b>RULE</b>	<b>CLASS</b> 514	<b>GROUP ART UNIT</b> 1649	<b>ATTORNEY DOCKET NO.</b> PROTEO.P03CI2
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/962,955 09/24/2001 PAT 6,933,280 which is a CIP of 09/938,275  
 08/22/2001  
 which is a CON of 08/947,057 10/08/1997 ABN  
 This application 10/821,250  
 claims benefit of 60/461,655 04/08/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\*

\*\* 08/11/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<b>STATE OR COUNTRY</b> WA	<b>SHEETS DRAWING</b> 30	<b>TOTAL CLAIMS</b> 15	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after				
Verified and Acknowledged	Examiner's Signature	Initials		

## ADDRESS

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## TITLE

Small peptides for the treatment of Alzheimer's disease and other beta-amyloid protein fibrillogenesis disorders

<b>FILING FEE RECEIVED</b> 460	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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